

December 10, 1997

Mr. B. D. Kenyon
President and Chief Executive Officer
Northeast Nuclear Energy Company
P.O. Box 128
Waterford, CT 06385

SUBJECT: INSPECTION REPORT- SARGENT & LUNDY INDEPENDENT CORRECTIVE
ACTION VERIFICATION PROGRAM (NRC INSPECTION REPORT
NO. 50-423/97-201)

Dear Mr. Kenyon:

The Special Projects Office (SPO) of the U.S. Nuclear Regulatory Commission (NRC) initiated a plan to monitor Sargent & Lundy's (S&L) implementation of the Independent Corrective Action Verification Program (ICAVP) for the duration of the effort. The plan encompassed the assessment of S&L's project manual and associated project instructions, the evaluation of the technical experience of project personnel, scheduled inspections of implementation activities, and planned and reactive supplemental reviews of ICAVP products and activities. During the periods from July 28 - August 1; August 26 - 28; and September 15 -19, 1997. During the period from October 6 - 10, 1997, a followup inspection was performed to assess S&L's corrective action in response to the issues identified by the team.

The results of the inspection were presented to the staff of S&L and Northeast Nuclear Energy Company (NNECO) during a public exit meeting on September 19, 1997. As discussed in the enclosed report, the inspection team identified several issues that warranted corrective action. S&L appears to have adequately addressed each issue. The team found that the implementation of the S&L ICAVP was in its early stages. The lack of completed work, especially the disposition of system requirements and review of modifications, limited the team from reaching an overall conclusion about the effectiveness of the ICAVP.

Since the completion of the inspection, the team continued to assess the status of the ICAVP through followup activities that involved additional visits to S&L offices, telephone interviews, and formal presentations by S&L. As previously stated, the SPO staff will continue to monitor ICAVP activities.

In accordance with Title 10, of the *Code of Federal Regulations*, Section 2.790(a), (10 CFR 2.790(a)), a copy of this letter and the enclosure will be placed in the NRC's Public Document Room.

Mr. B. D. Kenyon

2

Should you have any questions concerning the enclosed inspection report, please contact me at 301-415-2379 or Peter Koltay, the Unit 3 team leader at 301-415-2957.

Sincerely,

/signed/

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Docket No: 50-423

Enclosure: Inspection Report (50-423/97-201)

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U.S. NUCLEAR REGULATORY COMMISSION
OFFICE OF NUCLEAR REACTOR REGULATION

Docket No.: 50-423

Report No.: 97-201

License No.: NPF-49

Licensee: Northeast Nuclear Energy Company
P. O. Box 128
Waterford, CT 06385

Facility: Millstone Nuclear Power Station, Unit 3

Inspection at: Chicago, IL

Dates: July 28 - August 1; August 26 - 28; September 15 -19;
and October 6 - 10, 1997

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Attachment: Supplemental Information

TABLE OF CONTENTS

EXECUTIVE SUMMARY	I
Report Details	1
1.0 ICAVP Administration, Training, and Quality Assurance Audits	3
2.0 Tier 1 - System Design Basis	4
2.1 System Design Review	4
2.2 Operations, Maintenance, Testing, and Training Review	5
2.3 Corrective Action Review	6
2.4 Areas Not Available for Inspection	7
2.5 Tier 1 Conclusions	7
3.0 Tier 2 - Accident Mitigation Systems	7
4.0 Tier 3 - Plant Change Processes	8
5.0 Management Meetings	9
5.1 Exit Meeting Summary	9
INSPECTION PROCEDURES USED	10
ITEMS OPENED, CLOSED, AND DISCUSSED	10
LIST OF ACRONYMS USED	11

EXECUTIVE SUMMARY

The team evaluated Sargent & Lundy's (S&L's) implementation of the ICAVP audit plan, as discussed in the Project Manual (PM) that was approved by the NRC on June 3, 1997. Critical aspects of the S&L Independent Corrective Action Verification Program (ICAVP) inspection included the calculation of the system requirements checklist (SRC); Final Safety Analysis Report, (FSAR) Chapter 15, critical characteristics; thresholds for writing discrepancy reports (DRs); DR disposition process; depth of checklist driven reviews of the selected systems; and the adequacy of S&L's internal oversight of the ICAVP.

The team found that the implementation of the S&L ICAVP was in its early stages. Because of the lack of completed work, the team was not able to reach conclusions in some areas, including the review of modifications, component checklists, topical area reviews, the disposition of system requirements, and the effectiveness of the review of operations, maintenance, testing, and training. The lack of completed work limited the team from reaching an overall conclusions about the effectiveness of the ICAVP. During the course of the inspection, the team made the following observations regarding the ICAVP process. Each observation was discussed with S&L management and corrective actions and changes to the process were initiated, as necessary.

During the first week of inspection, S&L stated that the initial draft of the SRC was nearing completion. The team reviewed completed sections of the SRC and found inconsistencies and missing requirements. In response to the team's concerns S&L initiated a validation process of the document. The information initially was not incorporated into the SRC included data from NRC Regulatory Guides, FSAR sections, and Industry Codes and Standards. The inspectors observed the validation process during the week of August 24, and found it sufficiently comprehensive to identify and correct the types of errors previously identified by the team. During the second week of the inspection, the team found the SRC for service water system (SWS), quench spray system (QSS), and recirculation spray system (RSS) to be acceptable.

The team noted that the licensee's commitment tracking database had been sorted by the System Review Group (SRG) Lead and assigned to the respective system leads without an independent review. Additionally, the inspectors found that the S&L ICAVP review of the licensees commitment tracking database was limited to only those commitments linked directly to the database and the selected systems. When the database was searched for other general commitments, which could be applicable to the selected systems, approximately 2000 additional records were identified and added by S&L.

During the first week of the inspection, the team noted that discrepancy reports (DRs) identified were not being promptly issued. Some were several weeks old and continued to be evaluated for correctness and for previous licensee identification of the same problems. The team discussed the need for prompt issue of DRs following the identification of discrepancies. Through continuing monitoring efforts the team determined that S&L was effective in resolving this issue. The team also verified that the ICAVP database was designed to provide appropriate oversight authority at each level of the DR review and approval chain. This assured that any change to a DR going through the approval process restarts the process at the initiator level. The team found that the S&L ICAVP database was appropriately controlled.

During the first week of the inspection effort, the Operations Review Group (ORG) performance was not assessable because of a lack of progress by the S&L's ICAVP in this area. During the inspection, S&L committed to reevaluate the role of the ORG in accordance with the PM and redirect the ORG activities. During a follow-up evaluation on August 26 - 28, 1997, the team determined that the ORG continued to lag in the implementation of the program. Subsequent

changes in personnel and improvements in the ORG project instructions resulted in acceptable implementation methodology. However, during the inspection period, due to a lack of completed products, this area could not be fully assessed by the team. The NRC inspection team continues to monitor ORG activities.

A quality assurance (QA) audit of the S&L ICAVP was performed, by an S&L audit group that was independent of the ICAVP, from July 21 - 24, 1997. Due to the early stages of the ICAVP, the audit was limited to ICAVP staffing, work controls, and records controls. The QA audit identified that the ICAVP personnel were well qualified, that project training was appropriate, but that some personnel had not completed the required S&L QA manual training. Work organization was noted to be good and the scope of work was consistent with the approved plan. The team verified that the QA audit team leader was experienced in both inspection and audit techniques. The scope of the second QA audit performed from September 8 -11, 1997, was also limited due to the lack of completed work products caused by delays in the ICAVP implementation schedule.

Report Details

Background

On August 14, 1996, the U.S. Nuclear Regulatory Commission (NRC) issued a Confirmatory Order (Order) to Northeast Nuclear Energy Company (NNECO/licensee) requiring completion of an Independent Corrective Action Verification Program (ICAVP) before the restart of any Millstone unit. The Order directed the licensee to obtain the services of an organization independent of the licensee and each facility's design contractor to conduct a multi-disciplinary review of Millstone Units 1, 2, and 3. The staff approved Sargent & Lundy (S&L) as the ICAVP contractor for Millstone Units 1 and 3 on April 7, 1997.

The Order further stated that an ICAVP audit plan was to be developed by the independent contractor (S&L) and that the audit plan must describe (1) the conduct of an in-depth review of selected system's design and design basis after issuance of the facilities' operating licenses; (2) risk and safety-based criteria for selection of systems for review; (3) the audit plan to assure that the quality of results of the licensee's problem identification and corrective action programs on the selected systems is representative of, and consistent with, that of other systems; (4) procedures and schedules for parallel reporting of findings of the ICAVP team to both the NRC and the licensee; and (5) procedures for the ICAVP team to comment on the licensee's proposed resolution of the ICAVP team's findings and recommendations. Finally, the Order stated that the scope of the ICAVP shall include (1) a review of engineering design and configuration control processes; (2) verification of current, as-modified, conditions against design and licensing bases documentation; (3) verification that the design and licensing bases requirements have been properly translated into operating procedures and maintenance and test procedures; (4) verification of system performance through review of specific test records and/or observation of selected testing; and (5) review of proposed and implemented corrective actions for licensee-identified design deficiencies.

Three Tier ICAVP Process

In a Commission paper (SECY-97-003), "Millstone Restart Review Process," dated January 3, 1997, the staff described the Millstone restart review process. Within SECY-97-003, the staff acknowledged that the scope and depth of the independent contractor's effort would be determined during the staff's review of the ICAVP. To provide the level of assurance necessary to support a unit restart decision, the staff's expectation, described in SECY-97-003, was that the ICAVP would encompass the aspects of configuration control described in a three tier approach.

In Tier 1, four systems were selected to test the thoroughness of the licensee's reviews in identifying potential nonconformance with the design and licensing bases. These systems were the service water system (SWS), quench spray system (QSS) and recirculation spray system (RSS), emergency diesel generator and its support systems, and the auxiliary building's heat, ventilation, and air conditioning system and supplemental leakage collection and release system. The ICAVP contractor was tasked to conduct a thorough review of all design changes made to these systems after the issuance of the operating license, the remaining part of the original system configuration, and all operational aspects of these systems, including maintenance, surveillance testing, and training. The contractor was also expected to review the licensee's corrective actions for previously identified design-related deficiencies for the selected systems, including the deficiencies discovered during the implementation of the licensee's corrective action programs.

The objective of Tier 2 was to verify that critical design characteristics of systems relied upon to mitigate the consequences of accidents analyzed in the Final Safety Analysis Report are

consistent with those used in the design of the mitigation system and the accident analyses. Tier 2 of the ICAVP audit would review critical aspects of accident mitigation systems that were not examined as part of the Tier 1 reviews. These reviews were more limited in scope than those performed on the Tier 1 systems.

Tier 3 of the ICAVP audit required the review of a sample of changes made to the facility configuration since issuance of the operating license through processes other than the design change process. These included processes such as calculation changes, proposed Technical Specification changes, temporary modifications, drawing changes, procedure changes, set point change requests, and replacement item evaluations. Tier 3 will provide insights into the effectiveness of the various change processes in controlling the plant's configuration over the lifetime of the plant.

NRC Review of Sargent and Lundy Proposal

On March 17, 1997, S&L submitted a proposal for the conduct of the ICAVP in the form of a Project Manual (PM) which included an audit plan and Project Instructions (PIs) governing specific technical activities. An NRC inspection team was assembled to evaluate the submitted documents and to continue to assess and monitor the implementation of the S&L ICAVP effort. Following the team's review of the PM, working meetings were held with S&L to discuss the team's observations and findings regarding the PM. The team reviewed the resumes and interviewed personnel that S&L had proposed for participation in the audit. Based on the results of the review, S&L submitted Revisions 1 and 2 of the PM and associated documents on April 28, and again on May 16, 1997, respectively. The NRC approved the proposed ICAVP in a letter to S&L dated June 3, 1997.

NRC Oversight of S&L ICAVP

Following the review and approval of the S&L PM, the NRC initiated a plan to monitor the S&L ICAVP activities for the duration of the effort. The NRC's plan included an inspection by the NRC team of the implementation of the ICAVP. A two-week inspection effort was scheduled to start on July 28, 1997. However, the team's initial assessments, during the week of July 28, identified weaknesses in the implementation of the program. The team also noted a lack of completed auditable tasks, causing the team to delay the start of the second inspection week with the full team to September 15, 1997. An interim evaluation of ICAVP activities was conducted from August 26 - 28, 1997. Additional monitoring activities included periodic assessments by members of the ICAVP team to assure S&L's continuing compliance with the PM including adherence to the PIs approved by the staff. A meeting, open to the public, and attended by a representative NEAC, was held on September 19, 1997, at the offices of S&L, to discuss the inspection findings and observations. Additional review and inspection of the S&L program implementation and actions taken in response to the team findings was performed by one inspector the week of October 6.

1.0 ICAVP Administration, Training, and Quality Assurance Audits

a. Inspection Scope

Evaluate the results of quality assurance (QA) audits, ICAVP training records, ICAVP database control and security, and checklist and discrepancy report approvals. In addition, observe a number of internal ICAVP group and Internal Review Committee (IRC) meetings.

b. Observations and Findings

The team compared personal training records to the individual assignments and determined that ICAVP members were appropriately trained for the tasks assigned.

The team reviewed the results of two QA audits of the implementation of the S&L ICAVP. The first audit was conducted from July 21 - 24, 1997. The second audit was conducted from September 8 -11, 1997. At the time of the inspection, formal QA audit reports had not yet been issued. The team discussed the results of the QA audit with the audit team personnel. Because the ICAVP was in its early stages, the first S&L internal QA audit was limited to ICAVP staffing, work control, and record control. The QA audit identified that ICAVP personnel were well-qualified and that project training was appropriate.

Work organization was noted to be good and the scope of work was consistent with the approved plan. The team noted that the QA audit team leader was experienced in both inspection and audit techniques, and that the QA audit was thorough. The second S&L internal QA audit focused on the conduct of the ICAVP. The scope of this audit was also limited by the lack of completed work products caused by delays in the ICAVP implementation schedule. The team noted an area of potential weakness in that the audit did not identify significant problems with the ORG. Such problems were identified by the team during the inspection (see Section 2.2).

The team verified that the ICAVP database was designed to provide each level in the review chain the appropriate oversight authority while limiting access to prevent inappropriate or inadvertent changes. For example, the ICAVP manager could change a discrepancy report (DR) which was submitted by the initiator and found to be valid by the group leader, but the revised DR would be required to reenter the approval process at the initiator level. The team found that the S&L ICAVP database was appropriately controlled.

ICAVP group team meetings observed by the team were noted to be open and conducive to a questioning attitude. During the observation of these meetings, the team identified that the Program Review Group (PRG) was not planning to review post-construction architect-engineer turnover items. The PRG lead corrected this and PRG will be reviewing post-contractor architect-engineer turnover items.

The team identified some minor ICAVP coordination problems which were immediately corrected. For example, the Systems Review Group (SRG) thought that the Configuration Review Group (CRG) was going to review the material requirements on piping isometrics, but CRG checklists did not specify such a review. Another example involved the Tier 1 review of post-construction turnover items for the selected systems. This review was given to the PRG, that misunderstood the scope of the review. As a result, the PRG did not request the licensee to present all the information needed for the review.

c. Conclusions

QA was generally effective in auditing the ICAVP. However, weaknesses in the Operations Review Group (ORG) implementation efforts that were identified by the NRC inspection team were not identified in the second QA audit. The ICAVP database was appropriately designed to maintain the proper security and control. The DR process was conducted in accordance with the approved Project Instructions (PIs), and the management review improved the final product.

2.0 Tier 1 - System Design Basis

The team conducted a multidisciplinary review of the S&L ICAVP by selecting and reviewing samples of both completed products and work in progress. The Tier 1 inspection

focused on the System Reference List (SRL) and System Requirements Checklist (SRC) development. ICAVP assessment of calculations, topical areas, and modifications were also evaluated.

2.1 System Design Review

a. Inspection Scope

Assess the thoroughness of calculation reviews for the SWS, QSS, and RSS, evaluate the completeness of component checklists, and assess a sample of SRC dispositions and DRs.

b. Observations and Findings

The review of QSS and RSS hydraulic calculations revealed that the S&L engineer assigned was performing a critical review. For example, the inspector noted that the S&L engineer's review of RSS calculations were insightful, identifying an air pocket in the RSS suction pipe and questioned its potential effect on RSS fill time. The checklists associated with the review of the pipe stress calculations, pipe support calculations, and the refueling water storage tank revealed that the S&L review demonstrated an understanding of the licensing basis and design requirements for piping stress analysis, pipe support design, and equipment seismic qualification. The team identified an isolated example where the review of the checklists completed for SWS hydraulic calculations were not conducted in a critical manner, in that, the SWS reviewer did not question why several calculations using different values for the same input assumption. S&L agreed to review the calculations.

S&L was in the process of retrieving and compiling component attributes identified in licensing requirements, specifications, calculations, vendor documents, and licensee databases. No evaluations had been performed, therefore, the team was unable to draw any conclusions about the work products. However, the work in progress appeared comprehensive and in accordance with the project instructions for Checklist CK-MP3-02-5.3, "I&C Component Review Checklist."

The team reviewed over 60 DRs and concluded that the threshold for the identification of problems and assignment of significance was appropriate. The DRs reflected an understanding of the design and licensing basis of the plant and provided further evidence of a critical review.

c. Conclusions

S&L's performance in reviewing system calculations was generally acceptable. Component checklists were compiled in accordance with the approved procedures. S&L has established an adequate threshold for the identification of problems.

2.2 Operations, Maintenance, Testing, and Training Review

The ORG review was designed to focus on verifying that the system operating procedures, maintenance procedures, surveillance procedures, and training documents conform to the selected system's licensing and design bases. This portion of the Tier 1 review was to include an evaluation of post-modification tests.

a. Inspection Scope

Assess the implementation of the ICAVP by the ORG as outlined in PI-MP3-06, Revision 2, "Operations and Maintenance and Testing Procedures and Training Documentation Reviews."

b. Observations and Findings

During the first inspection week, the ORG did not appear to be ready to implement the ICAVP. Subsequent corrective actions, including changes in personnel, and to applicable PIs in the PM, were evaluated by the team and found to be acceptable. However, during the second inspection week, the team noted that the lack of availability of licensee documents contributed to a continued delay in ORG's full implementation of its tasks. The team determined the lack of documentation resulted from a combination of, failure by the ORG to identify and request all applicable documents, and the time required by the licensee to respond to document requests that were generated by ORG.

The team reviewed ORG assessments based on tasks outlined in PI-MP3-06, Revision 2, "Operations and Maintenance and Testing Procedures and Training Documentation Reviews," of which Section 5.2, required the ORG to complete the applicable section of the SRL. The SRL was designed as a master list of references to be used by S&L during their review. The portion of the SRL for which the ORG is responsible was found to be incomplete.

The requirements of other sections of PI-MP3-06, Revision 2, such as Section 5.4, "Bases Requirements Review," that directed the assessment of operating, maintenance, and testing procedures listed on the SRL, were not fully met due to the lack of documentation. Other weaknesses identified by the team included a lack of a plan to meet the requirements of Section 5.4.3.f to verify that instrumentation and controls, identified in the procedures to be used for remote and local operations, are consistent with the installed configuration; and the failure to establish a review criteria, as specified in Section 5.4.3.b, to verify that any required manual operator actions can be performed under accident conditions. S&L management initiated corrective actions that appeared to be adequate to resolve the team's concerns.

The inspector noted that many of the required procedures were on request from the licensee. Some of those which had been received were found to have been reviewed in accordance with the PIs. Some DRs had been written during the review of these procedures. The inspector found that the limited amount of review performed was critical and the appropriate threshold for the identification of problems had been established.

c. Conclusions

The team concluded that while personnel and procedural inadequacies identified during the first inspection week have been corrected, the ORG review efforts continued to be hampered by the lack of documents required to be reviewed. The team also found that Revision 2 to PI-MP3-06 did not fully clarify the ORG review process, as described to the NRC in a public meeting during the week of August 3, 1997. These issues were addressed by S&L during the inspection and ORG appears to be performing adequately.

2.3 Corrective Action Review

a. Inspection Scope

Evaluate corrective action review being conducted by the PRG. Review a sample of completed checklists for Unresolved Item Reports and Adverse Condition Reports to evaluate the thoroughness of S&L's review.

b. Observations and Findings

The team selected large samples of completed reviews and found that the PRG was conducting a critical review of the licensee's proposed corrective actions (known as Action Requests (ARs)) and that the threshold for the identification of problems for that level of review was appropriate. In some cases, when the licensee's planned corrective actions were vague or evaluative in nature, the PRG appropriately requested additional information from the licensee. However, the inspectors noted that the PRG did not plan to review the licensee's specific corrective actions (output documents from ARs, such as design change packages, engineering change packages, FSAR changes, procedure changes, etc.). The team questioned whether an adequate technical review could be performed on corrective actions without looking at the specific corrective actions the licensee was implementing. The team noted, however, that the SRG was reviewing changes from the licensee's corrective action process that were incorporated into the selected systems at the time the ICAVP began.

The PRG agreed to review corrective actions to the appropriate scope and level of detail. The team found this acceptable.

c. Conclusions

The team concluded that the Tier 1 corrective action reviews were being conducted by the PRG in a critical manner. The team was concerned about the depth of the PRG reviews but noted that the SRG was reviewing, in detail, all corrective actions which were implemented on the selected systems at the time the ICAVP began. In addition, the PRG agreed to conduct an appropriate review of the remaining corrective actions.

2.4 Areas Not Available for Inspection

Because of the lack of completed work, the team could not draw any substantial conclusions in the following areas (1) the review of modifications, (2) the component checklists, (3) topical area reviews, (4) the disposition of system requirements, and (5) the effectiveness of the review of operations, maintenance, testing and training. The team was also unable to draw any conclusions about the overall effectiveness of the ICAVP. These items remain open and will be subject to future NRC evaluations as an Inspection Followup Item. (IFI 50-423/97201-01)

2.5 Tier 1 Conclusions

The team found most of the preparatory work had been completed for the SWS, QSS, and RSS. The team also found that a measurable amount of individual reviews were in progress for the SWS, QSS, and RSS but little had been completed. The lack of completed work limited the team's ability to draw conclusions about the overall

effectiveness of the ICAVP. In general, the team found that reviews were being conducted in a critical manner with some exception in the SWS calculation review where appropriate corrective actions have been initiated. The threshold for the identification of problems were found to be appropriate.

The team identified weaknesses within the ORG that involved the lack of adherence to project instructions and a failure to anticipate documents that would be required from the licensee. Followup by the team in this area verified appropriate corrective action.

Reviewers demonstrated no hesitancy in the generation of DRs. The team found no evidence of any attempt to minimize or prevent the issuance of a DR by S&L management.

3.0 Tier 2 - Accident Mitigation Systems

a. Inspection Scope

Evaluate the status of the Accident Review Group (ARG) review and a selected number of completed reviews. Evaluate the DR threshold and degree of management support for DRs.

b. Observations and Findings

During the first inspection week, the team noted that 28 “open” items were identified on an internal ARG list, all of which appeared to be potential DRs. The team reviewed 6 of the potentially more significant items and found that S&L was waiting for further evaluation to see if the items were previously identified by the licensee. The team concluded that most of the selected items could have been written as DRs. The team discussed these observations with S&L management. S&L management indicated that the Order required a determination to see if the potential DRs had been found by the licensee. The team agreed that S&L management was correct in their assertion, but indicated that potential DRs should not be held for long periods of time. S&L management agreed to limit the amount of time spent to determine if a problem has previously been identified by the licensee before issuing DRs. By the time the team left the S&L offices, several more DRs had been placed into the process.

During the second week of the inspection, the team noted that the ARG had completed its review of 115 of the 232 critical characteristics approved by the NRC. The team selected a representative sample of completed reviews to evaluate and noted that the ARG review was critical and thorough. The threshold for the identification of problems was appropriate. The types of DRs written reflected an understanding of the Millstone Unit 3 design basis.

c. Conclusions

The ARG was conducting its review in a critical manner and the threshold for the initiation of DRs was appropriate.

4.0 Tier 3 - Plant Change Processes

a. Inspection Scope

Determine the status of the PRGs Tier 3 review and selected a number of completed reviews to evaluate. Evaluate the DR threshold and degree of management support for DRs.

b. Observations and Findings

In general, the team found that the PRG utilized checklists in a manner consistent with the staff's expectations and in accordance with the audit plan. Many of the reviews evaluated were in-progress or not complete and, as such, acceptability could not be determined. Nevertheless, the PRG Tier 3 reviews appeared thorough and consistent with the checklists.

The team noted that the PRG was responsible for reviewing architect-engineer turnover items at the time of plant licensing. The PRG was unclear on the review scope. They thought that the review was part of Tier 3, when, in fact, it had been given to the PRG by the SRG, and was a Tier 1 review. The PRG lead made the appropriate adjustments to the review scope.

c. Conclusions

The PRG appeared to have a good questioning attitude and approached their assignment with a critical eye. DRs already identified appeared valid and demonstrated a thorough review of the licensee's change processes.

5.0 Management Meetings

5.1 Exit Meeting Summary

The inspectors conducted a public exit meeting at the S&L office in Chicago, Illinois, during which time the inspection results were presented to S&L, and members of the public, on September 19, 1997. S&L acknowledged the team's findings.

A followup inspection was conducted October 6 - 10, 1997, and the inspector conducted an exit with S&L.

INSPECTION PROCEDURES USED

NRC Inspection Procedure 93801, "Safety System Functional Inspection"

NRC Manual Chapter 2535, "Design Verification Programs"

NRC Manual Chapter 0610, "Inspection Reports"

ITEMS OPENED, CLOSED, AND DISCUSSED

Opened

Inspection Followup Item (IFI) 50-413/97201, "Items not available for review during NRC ICAVP implementation inspection"

LIST OF ACRONYMS USED

AR	Action Request
ARG	Accident Review Group
CFR	<i>Code of Federal Regulations</i>
CMP	Configuration Management Program
CRG	Configuration Review Group
DR	discrepancy report
FSAR	Final Safety Analysis Report
I&C	Instrument and Controls
ICAVP	Independent Corrective Action Verification Program
IFI	Inspection Followup Item
IRC	Independent Review Committee
NNECO/licensee	Northeast Nuclear Energy Company
NRC	U.S. Nuclear Regulatory Commission
ORG	Operations Review Group
PI	Project Instruction
PR	Project Manual
PRG	Program Review Group
QA	Quality Assurance
QSS	Quench Spray System
RSS	Recirculation Spray System
S&L	Sargent and Lundy
SIL	Significant Item List
SRC	System Requirements Checklist
SRL	System Reference List
SRG	Systems Review Group
SWS	Service Water System